

ISSUE SLIP STAPLE AREA: (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Sellun		02-26-01
O.I.P.E. CLASSIFIER		43	3/15/01
FORMALITY REVIEW	H.S	866	04-03-01
RESPONSE FORMALITY REVIEW	T.S.P	140	7-10-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 □ Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
1	07-08
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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Best Available Copy